

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y 01 / 29 / 2016	

Full Name of Payee <b>API</b>			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 29 / 2016		
Mailing Address    4471 Nicole Dr			Amount 62.44		
City Lanham	State MD	Zip Code 20706	Transaction ID : D622419		
Purpose of Expenditure T-Shirts		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 29 / 2016		
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: IA		
Calendar Year-To-Date Per Election for Office Sought 47656.12			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>API</b>			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 29 / 2016		
Mailing Address    4471 Nicole Dr			Amount 547.58		
City Lanham	State MD	Zip Code 20706	Transaction ID : D622420		
Purpose of Expenditure Stickers		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 29 / 2016		
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: IA		
Calendar Year-To-Date Per Election for Office Sought 47656.12			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	610.02
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. James Rinefierd

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Signature

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
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Form/Schedule: F24A

Transaction ID :

Amending original filing FEC-1045450 after final invoice received for Stickers. See vendor, API.

Form/Schedule:

Transaction ID:

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 3 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><small>M M M</small> 01</div> <div><small>D D D</small> 29</div> <div><small>Y Y Y Y Y Y</small> 2016</div> </div>	

Full Name of Payee <b>Stones' Phones</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"><div><small>M M M</small> 01</div><div><small>D D D</small> 29</div><div><small>Y Y Y Y Y Y</small> 2016</div></div>	
Mailing Address 41-750 Rancho Las Palmas Dr Ste E-		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6064.75</div>	
City Rancho Mirage	State CA	Zip Code 92270	Transaction ID : <b>D622421</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"><div><small>M M M</small> 01</div><div><small>D D D</small> 29</div><div><small>Y Y Y Y Y Y</small> 2016</div></div>
Purpose of Expenditure Telephone Calls		Category/ Type	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">47656.12</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"><div><small>M M M</small></div><div><small>D D D</small></div><div><small>Y Y Y Y Y Y</small></div></div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
City	State	Zip Code	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"><div><small>M M M</small></div><div><small>D D D</small></div><div><small>Y Y Y Y Y Y</small></div></div>
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	6064.75
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	6674.77

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. James Rinefierd

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M M M  
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31

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Signature